## U. S. Department of Defense United States Air Force

## Transportation Incentive Program Application Outside the National Capital Region

(Upon completion, provide a copy to installation Point of Contact/POC)

PURPOSE: Executive Order 13150 requires Federal agencies to establish transportation incentive program in order to reduce Federal employees' contribution to traffic congestion and air pollution and to expand their commuting alternatives. The purpose of the program is to encourage commuting by mass transportation and provide financial incentives to members/employees.

A. applica	Applicant Infations will not be			print clearly	or type. Ap	plication n	nust be fill	ed out com	npletely.	Incomple	ete or illeg	gible
Applic	cation (please circ	cle one):	New	(	Change		Withdr	aw				
	as it appears in p				:			MI:	SSN (	Last Fou	ır):	
City (I	Residence):			Stat	e:		Zip Code: _					
Air Fo	orce Installation/N Location (City): _	MAJCOM	[.·		Office Tel	ephone Nu	mber (Con	 nmercial):	()			
Please	circle one:											
	orce Active Duty orce Civilian Emp			Tational Guar Tational Guar					ce Reserv		Duty n Employe	ee
Name What	of the transportate type of pass/ticket	tion syste	m/compa: use:									_ 
Mode(	(s) of Transportat	tion to be	used to a	nd from work	xplace (Pleas	se circle)						
Comm	nuter Bus C	ommuter	Train	Subway/L	ight Rail	Vanpo	ool	Other: _				
	are a van pool mele must have the											
В.	Employee Ce	rtificatio	n:									
fraudu Penalt	NING: This cert ilent certification y Action, providi ing dismissal.	may rend	ler the ma	iker subject to	o criminal p	rosecution	under Title	e 18, Unite	d States (	Code, Se	ction 1001	1, Civil
	I certify that I not transfer it I certify that the I certify that not I certify that the I certify that the I Note: The cu	to anyone ne monthl ny usual n nis inform	e else. y transit to nonthly co nation is a	penefit I am rommuting co	eceiving do sts are: \$ gree to noti	es not exce	ed my moi	nthly comr	nuting co	sts. employe	ee status.	
	your estimate If monthly fa at the full mo	ed transp re media	ortation exceeds	cost above. \$100 per mo	Benefits wil nth, Air Fo	ll be paid i orce/TRAN	n the forn	n of transp	ortation	vouche	rs wherev	er possible.
Emplo	oyee Signature: _						_ 1	Date:				

**PRIVACY ACT STATEMENT:** This information is solicited under authority of Public Law 101-509. Furnishing the information on this form is voluntary, but failure to do so may result in disapproval of your request for the mass transportation fringe benefit. The purpose of this information is to facilitate timely processing of your request, to ensure your eligibility, and to prevent misuse of the funds involved. This information will be matched with lists at other Federal agencies to ensure that you are not listed as a carpool or vanpool participant or a holder of any other form of vehicle worksite parking permit with DoD or any other Federal agency. Partial social security number (SSN - last four numbers) will be used for record keeping purposes.